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PLACE OF BIRTH County of Sala	ARIZONA STATE BOARD OF HEALTH
strict of	BUREAU OF VITAL STATISTICS State Index No
wn of	ORIGINAL CERTIFICATE OF BIRTH County Registrar No.
or Globe	Local Registrar No.
ty of House	No
Full name of child Justavo 3	Hanodo If child is not yet named, make supplemental report, as directed.
Sex of Child To be answered ONLY	A Twin triplet or other 6. Legitimate!
male in event of plural -	
FATHER	14. MOTHER
ull name Rophiel Granado	Full maiden name Carlola Robles
	1
. Residence (Usual place of abode)	Anyona If nonresident, give place and state
If nonresident, give place and state	16. Color or race
O. Color or race	
mexican 11. Age at last	birthday 49 (Years) Mexican 17. Age at last birthday 32 (Years)
2. Birthplace (city or place)	18. Birthplace (city or place) Bishee
(State or country)	(State or country) Myona
13. Occupation	19. Occupation
Nature of industry Mines	Nature of industry Housewfe
. Number of children of this mother) (1	a) Born alive and now living full 21. Were precautions taken against opa-
e Lines we shild heroin (b) Born alive but now dead. Two thalmia neonatorum?
CERTIFICA	ATE OF ATTENDING PHYSICIAN OR MIDWIFE
hereby certify that I attended the birth of	this child, who was hom alive at 3 f. m. on the date above stated, (Born alive or stillborn.)
*When there was no attending physician midwife, then the father, householder, et should make this return. A stillborn chi is one that neither breathes nor shows oth	(Physician
evidences of life after birth, iven name added from supplemental report	Filed 5/10 1928 By E. Winghtone 47 6
Month, day, year	r. Pecal Registrar,
Registrar.	Filed
•	592 - 7111 - 395 1

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